OMB Clearance No.: 0970-0060 Expiration Date: 10/31/2018

# LOW INCOME HOME ENERGY ASSISTANCE PROGRAM LIHEAP HOUSEHOLD REPORT-LONG FORM

### **Grantee Information**

Grantee Name:Arizona	FFY2019(10/01/2018 - 09/30/2019)	
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#### Instructions

instructions
The 50 States, District of Columbia, and the Commonwealth of Puerto Rico and other territories are required to use the LIHEAP Household Report-Long Form in providing household counts for the designated Federal Fiscal Year. The Report consists of the following six sections that are to include unduplicated household counts for both LIHEAP assisted and LIHEAP applicant households.
I. Number of Assisted Households II. Number of Assisted Households by Poverty Interval III. Number of Assisted Households by Vulnerable Population IV. Number of Applicant Households V. Number of Applicant Households by Poverty Interval VI. Number of Assisted Households by Young Child Age Category
Except for Section VI, the household counts for LIHEAP assisted and applicant households are required under the LIHEAP statute. Section VI is optional. If LIHEAP funds are used for any other type of service not listed in the sections below, describe the service and the total number of households assisted with that service in the Not es Section.
The required data for LIHEAP assisted households for each State are included in the Department's LIHEAP annual Report to Congress. The required data are also us ed in measuring LIHEAP targeting performance under the Government Performance and Results Act (GPRA) of 1993, as amended by the GPRA Modernization Act of 2010. As the reported data are aggregated, the information in this report is not considered to be confidential.
Click HERE to read the expanded Household Report - Long Form Instructions.
Do the data below include estimated figures? If YES, select the appropriate box in column A of Section I and Section IV for each type of assistance that has at least one estimated data entry.  Select One  Yes  No

### I. Number of Assisted Households

Number of assisted households					
	A. Select if estimate d data	B. Total Number of Households			
1. Heating		8,602			
2. Cooling		21,455			
3.Crisis					
a. Year Round		8,146			
b. Winter					
c. Summer					
d. Emergency Furnace Repair & Replacement					
e.					
f.					
4. Weatherization		474			
5. Any type of LIHEAP assistance		29,489			
6. Bill Payment Assistance		29,155			
7. Nominal Payments		0			

### II. Number of Assisted Households by Poverty Interval

Applicable HHS Poverty Guidelines, in effect at the be	Applicable HHS Poverty Guidelines, in effect at the beginning of FFY				
'	A. Under 75% pove rty	I . • I	1 · · · · · · · · · · · · · · · · · · ·	D. 126%-150% pov erty	E. Over 150% pove rty
1. Heating	5,110	1,562	914	646	370
2. Cooling	12,977	3,679	2,183	1,555	1,061

3.Crisis					
a. Year Round	5,388	1,047	774	550	387
b. Winter					
c. Summer					
d. Emergency Furnace Repair & Replacement					
e.					
f.					
4. Weatherization	87	90	90	82	125

### III. Number of Assisted Households by Vulnerable Population

Number of assisted households with at least one member of the following target groups				
Type of LIHEAP assistance	A. 60 years or older (elderly)	B. Disabled	C. Age 5 years or u nder (young child)	D. Elderly, disable d, or young child
1. Heating	2,728	4,448	1,882	6,462
2. Cooling	6,205	11,212	5,348	16,275
3.Crisis				
a. Year Round	1,877	3,098	2,264	5,923
b. Winter				
c. Summer				
d. Emergency Furnace Repair & Replacement				
e.				
f.				
4. Weatherization	293	239	64	370
5. Any type of LIHEAP assistance	8,812	15,264	7,049	22,254

## IV. Number of Applicant Households

Number of applicant households		
	A. Select if estimate d data	B. Total Number of Households
1. Heating		8,602
2. Cooling		21,455
3.Crisis		
a. Year Round		8,146
b. Winter		
c. Summer		
d. Emergency Furnace Repair & Replacement		
e.		
f.		
4. Weatherization		474

### V. Number of Applicant Households by Poverty Interval

Applicable HHS Poverty Guideli	Applicable HHS Poverty Guidelines, in effect at the beginning of FFY					
Type of LIHEAP assistance	A. Under 75% pove rty	B. 75%-100% pove rty		D. 126%-150% pov erty	E. Over 150% pove rty	F. Income data una vailable
1. Heating	5,110	1,562	914	646	370	
2. Cooling	12,977	3,679	2,183	1,555	1,061	
3.Crisis	3.Crisis					
a. Year Round	5,388	1,047	774	550	387	
b. Winter						
c. Summer						
d. Emergency Furnace Repair & Replacement						
e.						
f.						

| 4. Weatherization | | 87 | 90 | 90 | 82 | 125 |

### VI. Number of Assisted Households by Young Child Age Category (Optional)

At least one member who is			
Type of LIHEAP assistance	A. Age 2 years or u nder	B. Age 3 years thro ugh 5 years	
1. Heating	1,064	1,285	
2. Cooling	3,208	3,573	
3.Crisis			
a. Year Round	1,304	1,583	
b. Winter			
c. Summer			
d. Emergency Furnace Repair & Replacement			
e.			
f.			
4. Weatherization	32	40	

#### Notes

In 2019, Arizona updated its methods for unduplicating and counting households served vs services provided. Service counts for Heating, Cooling or Crisis will change in FY2 019. The database system had some bugs in 2018, and analysis of FY 2018 in comparison to FY 2018, data made it appear that some services, especially with respect to Crisis, may have been undercounted due to deduplication for the purpose of obtaining the household count. In other words, many households received assistance for heating or coolin g AND also received a crisis payment. Some households may have received a heating AND a cooling payment due to programmatic changes, such as case management incenti ves that make smaller payments over a number of months. This year we are able to count services separately and still obtain an unduplicated count of unique households. Also, the total number of total households increased substantially last year. This is primarily due to programmatic changes, such as recertification for certain vulnerable households. There may also be higher counts due to better data coming forth and fewer records going uncounted due to missing information and unresolvable errors. WX HHs are down due to waitlists and ongoing projects. These will not be counted until they are completed and billed so we have cost data.

#### Certification

Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge.  I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalities. (U.S. Code, Title 18, Section 1001)			
a. Name of Authorized Official:	d. Telephone:		
b. Title of Authorized Official:	e. Email address:		
c. Signature of Authorized Official:	f. Date Submitted:		